



## **Connecticut Turning To Youth and Families Working To Build A Recovery-Oriented System of Care (ROSC) for Adolescents, Young Adults, and Their Families**

*"To achieve recovery-oriented systems of care will require a new mindset and transformation of systems and services, focusing not on problems but rather on engendering hope, optimism, and maximizing each young person's full potential. Treatment services and interventions need to be adapted to build in a recovery-oriented philosophy from intake through continuing care, modeling wraparound approaches."*

*(SAMHSA 2009 – Designing a ROSC Model for Adolescents and Transition Age Youth)*

### **The ROSC Movement Has Revolutionized CT's Adult SUD Systems, But Youth and Family Systems Have Remained Stagnant Ignoring Recovery-Oriented Models:**

- In Connecticut, about 8% of youth ages 12 through 17 and 24% of those 18 through 25 have met the clinical criteria for abuse or dependence on alcohol or an illicit drug, within the past year, according to a recent federal survey (2012 PRI Study).
- Over 90% of people with abuse/dependence started using under the age of 18 and met criteria by age 20. Treatment and recovery supports in the first 10 years of use (basically adolescents & young adult hood) is associated with cutting the years of use by decades and key to reducing long term costs to society (Dennis, M.).
- Society pays up to \$2.3 million every time one kid quits high school for a life of drug abuse and related crime (Brandeis University – 2001).

### **Why 2012 Is The Right Time For Forward-Looking Youth and Family Recovery Investments In CT:**

- *2012 Legislative Program Review & Investigations Study of Adolescent SUD Systems:* This important study has just been expanded to include both publicly and privately insured adolescents.
- *Health Reform:* Over the next three years the implementation of the Mental Health Parity and Addictions Equity Act, as well as the Affordable Care Act will have profound implications on how the treatment and recovery from substance use conditions are structured, insured, and paid for in Connecticut. Bringing recovery supports to scale for youth and families has the potential to position a long-term strategy in our State to have these services ultimately reimbursed by Medicaid and private insurers.
- *SAPT Block Grant Changes:* As part of the new Block Grant application process DHMAS has been requested by SAMHSA to prioritize "youth with substance use disorders," according to the Federal Register, Vol. 76, No. 117, from June 17, 2011. As reported by SAMHSA in the Federal Register two of the most frequent public comments from around the country were in support of their inclusion of this population. CT stakeholders submitted more than 200 public comments to DHMAS in September of 2011 requesting revisions to the current CT application that continues to overlook this population.

## Youth Recovery Supports = Fiscally Responsible Investments With Millions In Potential Returns For CT State Agencies:

- **FACT ~ Addiction Is A Disease Of Adolescents:** DCF, DHMAS, JJ, DOE, DSS, and CSSD professionals, parents, and schools have been on the frontlines witnessing the severity of substance use problems growing among young people. Unfortunately they have lacked the community-based recovery models that research demonstrates are the best way to support long-term recovery.
- **FACT ~ Addiction Is A Chronic Condition:** Even for the young people who are able to access CT's acute treatment system as adolescents and young adults, they struggle to sustain positive outcomes without ongoing chronic care management, developmentally appropriate recovery linkages, and structured peer recovery support.
- **FACT ~ There Is A High Correlation Between SUDs and Offending:** CT youth are increasingly involved in criminal justice systems early in life as a result of substance use. Judges, lawyers, parole officers, case managers, and many others have been desperately seeking ways to link these young people with positive peer cultures of recovery that have the power to demonstrate alternative lifestyles.

## Connecticut Turning To Youth and Families (CTYF) Organizational Capabilities:

CTYF first emerged as a grassroots organization in 2008, founded by youth and families in recovery, and became an established 501(c)(3) non-for-profit statewide recovery community organization in 2009. CTYF has served CT as a volunteer recovery organization working to strengthen Connecticut's prevention, treatment and recovery support services for youth and families. Using the power of youth and families in long-term recovery from alcohol and other drug addiction, CTYF offers community-based peer-to-peer recovery support programs and services. We are parents, family members, and youth who have our own family stories dealing with alcohol and other drug use problems. Based on the positive strength, hope, and voice of youth and families who have been successful maintaining recovery, we offer help increasing access to existing supportive recovery communities. CTYF provides a place, where families can turn for information, connections, and choices. We help build youth and family peer-to-peer prevention and recovery efforts in Connecticut's communities through public advocacy, recovery coaching, and helping others to connect with recovery supports in Connecticut communities.

- ***Our vision is for Connecticut's youth and families to be addiction-free, healthy members of strong families and communities. Working together, we can make youth-guided, family-centered recovery a reality in Connecticut.***
- ***Our mission is to help youth and families facing drug and alcohol problems connect with prevention, treatment and recovery services through a statewide network of peer-to-peer supports. We are a unified voice of people who have "been there" working together to strengthen families and communities, improve policies and practices, and, above all, save lives.***

We work with other nonprofit organizations and welcome collaboration with public and private partners to provide these three programs:

1. **Advocacy to Increase Access:** CTYF organizes and works to unify the advocacy efforts of youth and families as a peer recovery community.
2. **Peer-to-Peer Recovery Support:** CTYF provides training, supervision and opportunities for youth and families to support and help others to prevent alcohol and drug addiction, and initiate and sustain recovery.

3. **Building Community Peer-to-Peer Support Services:** CTYF brings together grassroots programs, educators, business leaders, parents, families and concerned youth to develop the tools needed for creating and sustaining peer-to-peer addiction recovery activities. CTYF provides technical assistance so that every community can become linked with other prevention, treatment, and peer-to-peer recovery resources statewide.

### Historical Activity Highlights:

- *September 2008* – Strategic Planning Kick Off conference at Killams Point which sparked a new level of volunteer energy, leadership, and direction to accomplish the next phase of work and move forward as a nonprofit organization with an enhanced vision and mission.
- *January 2009* – CTYF was granted \$25,000 by Commissioner Kirk that assisted in holding 3 Community Recovery Events with over 1000 participants, grow our volunteer base, train DHMAS / DCF providers on the concept of recovery supports, and allow us to provide volunteer peer recovery support to youth and families
- *October 2009* – CTYF became a featured national contributor for The Reclaiming Futures Online Blog funded by *Robert Wood Johnson Foundation* that focuses on juvenile justice reform through drug and alcohol treatment and recovery supports.
- *December 2010* – CTYF Youth Volunteers were invited plenary speakers for the closing session of The 2010 Joint Meeting on Adolescent Treatment Effectiveness sponsored by a collaboration of federal and non-profit agencies alongside ONDCP Director Gil Kerlikowske.
- *April 2011* – CTYF begins to provide recovery support training and services as a partner with provider agencies as a bridge to the indigenous youth and family recovery community. The Re-Entry and Family Treatment Grant (RAFT) Project is a joint project with Wheeler Clinic and DCF funded by SAMHSA
- *August 2011* – Joined Faces & Voices Of Recovery National Association of Recovery Community Organizations (ARCO) to officially join the ranks of over 200 recovery community organizations across the country.
- *February 2012* – CTYF expands the all-volunteer Board of Directors to 12 with a renewed spirit to grow and widen recovery doorways for young people and their families despite difficult fiscal times.
- *May 2012* – Co-Sponsored a Connecticut listening forum in Hartford: “Dialogue On Issues Facing Young People In or Seeking Recovery from Addiction to Alcohol and Drugs” with state policy makers.



## **A Unique Set of Circumstances and Opportunities Exist for Realignment and Reform:**

*"There is general agreement among adolescents who have resolved AOD problems and those who have assisted in that process that recovery is more than the removal or radical deceleration of alcohol and drug use from an otherwise unchanged life. Adolescent alcohol and other drug problems are often closely bundled with other personal or family problems. Recovery connotes the broader resolution of these problems and the movement toward greater physical, emotional, and relational health (William L White, M.A. & Susan H. Godley, RhD.)."*

CTYF is continuing to request funding for new peer-to-peer recovery support services to offer programs and services targeting youth and families with a history of alcohol, drug problems, or co-occurring mental and substance use disorders. Our target population is deliberately broad because just as addiction knows no boundaries, neither does the youth and family prevention and recovery needs. We welcome all pathways to recovery: 12-Step, other mutual aid, faith-based, medication-assisted, individual determination and others. Data collected at our community events demonstrate success reaching and engaging a culturally diverse target audience of young people ages 12-30, their caregivers and siblings.

Below is a list of the innovative services that we envision have the potential to enhance the continuum of care for adolescents, young adults, and families by improving recovery outcomes and lowering costs to CT systems of care:

- Peer Recovery Coaching and Recovery Management Planning
- SBIRT Screening (ERs, Enhanced Care Clinics, Treatment Centers, Recovery Centers, Courts, Etc.)
- Telephone Recovery Support
- Leadership Group Models (See Video: <http://tinyurl.com/P2P-Central>)
- Family Recovery Support Programs
- Statewide Call-In / Peer Support Center
- Recovery Resource Mapping (Recovery Mining)
- Peer Health Navigation (Housing, Treatment, Support Meetings, Recreational, etc.)
- Education, Career, and Employment Supports
- Online Recovery Support / Coaching Platform
- Local Youth and Family Recovery Film Festivals (See Video: <http://tinyurl.com/NB-FF-SHORT>)
- Wellness and Prevention Programs / Education (See Video: <http://tinyurl.com/CAMPUSCHOICES>)

We understand Connecticut faces tremendous budget deficits and funding new types of services might seem out of the question. But funding the above services will support youth recovery at home while decreasing the demands put on the system as young people age. This allows us all to accomplish more with less and put CT in a position to maximize health reform opportunities.

Sincerely CTYF Board of Directors,

*Victor Alfandre, Co-Board President | Greg Williams, Co-Board President (Co-Founder)  
Anne Thompson, Co-Board Vice President | Marty Brault, Co-Board Vice President  
Martin Williams, Board Treasurer | Christina Fontaine, Board Secretary  
Donna Aligata, Board Member (Co-Founder) | Jeanne Mele, Board Member  
Don Fertman, Board Member | Ken Aligata, Board Member  
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